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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Lamon | |
| Write the name that is on your government-issued | First name | First name |
| picture identification (for example, your driver's | Middle name Felton | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX0688 | xxx - xx |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Lamon First Name | Felton Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years Include trade names and | Business name | Business name |
| doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 657 W. Vermont | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | ChicagoIllinois60628CityStateZip Code | City State Zip Code |
| | Cook County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |
| | | |

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| Deb | otor 1 Lamon | | | Case number (if kno | wn) | | | |
|------------------------|---|--|--|--|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | |
| Par | Part 2: Tell the Court About Your Bankruptcy Case | | | | | | | |
| | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descript Bankruptcy (Form B2010)). Also Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | . <i>§ 342(b) for Individuals Filing for</i> priate box. | | | |
| | How you will pay the fee | more details about how yo cashier's check, or money may pay with a credit card. I need to pay the fee in in Individuals to Pay Your File. I request that my fee be judge may, but is not request the official poverty line the | ou may pay. Typically, if you order If your attorney is dor check with a pre-printenstallments. If you choose filing Fee in Installments (Owaived (You may request uired to, waive your fee, an at applies to your family siou must fill out the Application | ou are paying the submitting your ed address. this option, sign official Form 103, this option only d may do so only ze and you are u | he clerk's office in your local court for efee yourself, you may pay with cash, a payment on your behalf, your attorney an and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a yif your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) | | | |
| ı | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | | | |
| (! ! ! | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | | | |
| | Do you rent your residence? | No. Go to line 12. | Statement About an Eviction | | you want to stay in your residence? t You (Form 101A) and file it with | | | |

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Felton Debtor 1 Lamon __ Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Lamon Felton Case number (if known)
First Name Middle Name Last Name

| Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling | | | | | |
|---|---|---|---|--|--|
| | About Debtor 1: | | Ab | out Debtor 2 (Sp | pouse Only in a Joint Case): |
| ^{15.} Tell the court | You must check one: | | You | u must check one: | |
| whether you have received briefing about credit counseling. | counseling ager | ing from an approved credit ncy within the 180 days before I optcy petition, and I received a mpletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a mpletion. |
| The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | the certificate and the payment plan, eveloped with the agency. |
| about credit counseling before you file for bankruptcy. You must truthfully | counseling ager | ing from an approved credit ncy within the 180 days before I optcy petition, but I do not have a appletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion. |
| check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | | ter you file this bankruptcy petition, copy of the certificate and payment |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | | from an approve obtain those semade my reques | ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the |
| creditors can begin collection activities again. | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | | requirement, atta efforts you made unable to obtain i | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this |
| | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | |
| | receive a briefing must file a certifica with a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | | If the court is satisfied with your reasons, you need to a briefing within 30 days after you file. The must file a certificate from the approved agency with a copy of the payment plan you developed If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granter for cause and is limited to a maximum of 15 days. | within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. |
| | | he 30-day deadline is granted only mited to a maximum of 15 days. | | | |
| | I am not required counseling beca | d to receive a briefing about credit ause of: | | I am not require counseling beca | d to receive a briefing about credit ause of: |
| | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. |
| | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. | | | about credit cour | are not required to receive a briefing nseling, you must file a motion for counseling with the court. |

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| Debtor 1 Lamon | Maria de Maria | Felton | Case number (if know | <u> </u> | |
|--|--|---|--|--|--|
| Part 6: First Name Answer These Que | Middle Name estions for Reporting | Last Name Purposes | | | |
| 16. What kind of debts do you have? | 16a. Are your debts "incurred by an No. Go to li Yes. Go to l 16b. Are your debts money for a bus No. Go to li Yes. Go to l | primarily consumer debtindividual primarily for a pne 16b. ine 17. primarily business debts siness or investment or throng 16c. | ersonal, family, or house Programmers debts are debts The operation of the | ots that you incurred to obtain e business or investment. | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing und expenses are | under Chapter 7. Go to line fler Chapter 7. Do you estimate paid that funds will be availa | te that after any exempt pro | operty is excluded and administrative ed creditors? | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 5,001 | -5,000 -10,000 1-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill | 00 | 0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill | 00 | 0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| Part 7: Sign Below | | | | | |
| For you I have examined this petition, and I declare under penalty of correct. If I have chosen to file under Chapter 7, I am aware that I may of title 11, United States Code. I understand the relief available under Chapter 7. If no attorney represents me and I did not pay or agree to pay out this document, I have obtained and read the notice requirements of title 11, United States Code. I understand the relief available under Chapter 7. | | | | eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed who is not an attorney to help me fill .S.C. § 342(b). | |
| | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | /s/ Lamon Felton Signature of Debton | | Signature of | Debtor 2 | |
| | Executed on | 1/10/2017 MM / DD / YYYY | Executed of | | |

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| Debtor 1 Lamon | | Felton | Case number (if ki | nown) |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the i | information in the schedu | les filed with the petition is incorrect. |
| attorney, you do not | 4.0 | | | |
| need to file this page. | /s/ Megan Holmes | | Date | 1/10/2017 |
| | Signature of Attorney for | or Debtor | ——— MN | M / DD / YYYY |
| | | | | |
| | | | | |
| | Megan Holmes | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3128374019 | Email address | mholmes@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Lamon | Felton | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

| П | Check if this is an |
|---|---------------------|
| | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|---|--|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$15,575.00 ——————————————————————————————————— |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$15,575.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$23,704.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$26,209.50 |
| Your total liabilities | \$49,913.50 |
| Part 3: Summarize Your Income and Expenses | |
| Carimanizo Toar moonio ana Exponesso | |
| 4. Schedule I: Your Income (Official Form 106I) | \$2,632.45 |
| Copy your combined monthly income from line 12 of Schedule I | |
| | |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$2,640.00 |

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| Deb | tor 1 | Lamon | | Felton | Case number (if known) | |
|-------------|-------------------------|--|---------------------------------|--|--|------------|
| | | First Name | Middle Name | Last Name | | |
| Part | 4: | Answer These Question | ons for Administrati | ve and Statistical Reco | rds | |
| 6. A | re yo | ou filing for bankruptcy un | der Chapters 7, 11, or | 13? | | |
| г | – N | lo. You have nothing to rep | ort on this part of the for | rm. Check this box and subm | it this form to the court with your other sche | edules. |
| | | es. | | | , | |
| Ŀ | ✓] ^Υ | | | | | |
| 7. W | /hat | kind of debt do you have? | | | | |
| Ī | | | | | by an individual primarily for a personal, | |
| _ | fa | amily, or household purpose | e. 11 U.S.C. § 101(8). F | ill out lines 8-10 for statistical | purposes. 28 U.S.C. § 159. | |
| | | our debts are not primarins form to the court with you | | u have nothing to report on th | nis part of the form. Check this box and sub | mit |
| | _ | | | | | 4 |
| | | 1 122A-1 Line 11; OR , Form | | e: Copy your total current mor rm 122C-1 Line 14. | nthly income from Official | \$3,324.84 |
| 9. | Con | ov the following special ca | itegories of claims fro | m Part 4, line 6 of Schedule | • E/F: | |
| | | | | | | |
| | Fro | m Part 4 on Schedule E/F | , copy the following: | | Total claim | |
| | 9a. | Domestic support obligation | ns (Copy line 6a.) | | \$0.00 | |
| | | | | | \$0.00 | |
| | 9b. | Taxes and certain other deb | its you owe the governn | nent. (Copy line 6b.) | <u>:</u> | |
| | 9c. | Claims for death or persona | l injury while you were ir | ntoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. | Student loans. (Copy line 6f.) | | | \$0.00 | |
| | 90 | 9e. Obligations arising out of a separation agreement or | r divorce that you did not repo | sort as \$0.00 | | |
| | | priority claims. (Copy line 6g.) | | alvolos mai you did not rept | | |
| | ۰. | Dalata ta manaian ang confirm | hadaa alaaa aaal etti ee | ainsilan dalata (Caasa line Cla) | \$0.00 | |
| | 9ī. l | Debts to pension or profit-si | naring plans, and other s | similar debts. (Copy line 6h.) | | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to ider | ntify your case: | | |
|--|---|---|--|--|
| | | | Edhar | |
| Debtor 1 | <u>Lamon</u> First Name | Middle | Felton Name Last Name | |
| Debtor 2 | i iist ivaille | Middle | Name Last Name | |
| (Spouse, if fil | First Name | Middle | Name Last Name | |
| United Sta | ates Bankruptcy Cou | urt for the: Northern | District of Illinois (State) | |
| Case num (If known) | ber | | | _ |
| Officia | l Form 106 | A/B | | Check if this is an amended filing |
| Sched | dule A/B: I | Property | | 12/1 |
| category v responsibl write your | where you think it e for supplying co name and case n | fits best. Be as complete a rrect information. If more umber (if known). Answer | ist an asset only once. If an asset fits in more and accurate as possible. If two married peop space is needed, attach a separate sheet to t every question. and, or Other Real Estate You Own or Ha | le are filing together, both are equally his form. On the top of any additional pages, |
| | | _ | in any residence, building, land, or similar pr | |
| | No. Go to Part 2 | legal of equitable interest | in any residence, building, land, or similar pr | operty: |
| | | | | |
| Ц | Yes. Where is the p | property? | | |
| | | | What is the property? Check all that apply. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> : |
| 1.1 | Street address, if a | vailable, or other description | Single-family home | Creditors Who Have Claims Secured by Property. |
| | , | , | Duplex or multi-unit building | Current value of the Current value of the |
| | - | | Condominium or cooperative | entire property? portion you own? |
| | | | Manufactured or mobile home | |
| | Number Stree | et . | Land | Describe the nature of your ownership |
| | | • | Investment property | interest (such as fee simple, tenancy by |
| | City | State Zip Code | Timeshare Other | the entireties, or a life estate), if known. |
| | o.i, | p | Who has an interest in the property? Check | Check if this is community property (see instructions) |
| | | | one. | |
| | | | Debtor 1 only | _ |
| | | | Debtor 2 only | |
| | | | Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and another | |
| | | | Other information you wish to add about th | is item, such as local |
| | | | property identification number: | |
| If you | own or have more | than one, list here: | | |
| 1.0 | | | What is the property? Check all that apply. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> : |
| 1.2 | Street address, if a | vailable, or other description | Single-family home | Creditors Who Have Claims Secured by Property. |
| | | | Duplex or multi-unit building | Current value of the Current value of the |
| | - | | Condominium or cooperative Manufactured or mobile home | entire property? portion you own? |
| | | | Land | |
| | Number Stree | et | Investment property | Describe the nature of your ownership |
| | | | Timeshare | interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | City | State Zip Code | Other | the entireties, or a me estate), it known. |
| | | | | Check if this is community property |
| | | | Who has an interest in the property? Check | |
| | | | one. | ⊔ |
| | | | Debtor 1 only | |
| | | | Debtor 2 only Debtor 1 and Debtor 2 only | |
| | | | At least one of the debtors and another | |
| | | | Ш | |
| | | | Other information you wish to add about th property identification number: | is item, such as local |

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| Debtor 1 | Lamon First Name | Middle Name | Felton Last Name | Case numbe | (if known) | |
|-------------|--|---|---|-------------------|--|---|
| 1.3 | et address, if available, or of | v | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nur City | nber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by e estate), if known. |
| | |]]] | Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Other information you wish to add property identification number: | nother | Check if this is co (see instructions) such as local | mmunity property |
| | the dollar value of the pove attached for Part 1. W | rtion you own for a rite that number h | all of your entries from Part 1, inclere. | uding any entrie | s for pages | |
| Do you ov | | equitable interest | in any vehicles, whether they are | | | |
| | ns, trucks, tractors, sport u | | also report it on Schedule G: Executo cycles | ory Contracts and | Unexpired Leases. | |
| 3.1 | Make Model: Year: | Dodge Avenger 2013 | Who has an interest in the proone. Debtor 1 only | pperty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2013 Dodge Avenger | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a | | Current value of the entire property? \$12475.00 | Current value of the portion you own? \$12475.00 |
| 3.2 | Make Model: Year: | | who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| | | | er (if known) | |
|-----|---|---|---|---|
| | First Name Middle Name | Last Name | | |
| 3.3 | Make Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any secu | claims or exemptions. Property ired claims on Schedule aims Secured by Property Current value of the portion you own? |
| | Other information: | Debtor 1 and Debtor 2 only | ————— | ————— |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 3.4 | Make | Who has an interest in the property? Check | | claims or exemptions. P |
| | Model: Year: | one. | • | red claims on <i>Schedule</i> aims Secured by Propert |
| | Approximate mileage: | Debtor 1 only | | . , , |
| | ··· <u> </u> | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another | | |
| | | <u> </u> | | |
| | | Check if this is community property (see instructions) | | |
| | No Vec | | | |
| | Yes Make | Who has an interest in the property? Check | | |
| | Yes | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | red claims on <i>Schedule</i> |
| | Yes Make Model: | one. | the amount of any secu | red claims on <i>Schedule</i> |
| | Yes Make Model: Year: | one. Debtor 1 only | the amount of any secu Creditors Who Have Cla | red claims on Schedule aims Secured by Propert |
| | Yes Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only | the amount of any secu Creditors Who Have Cla Current value of the | rred claims on Schedule nims Secured by Propert Current value of the |
| | Yes Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secu Creditors Who Have Cla Current value of the | rred claims on Schedule nims Secured by Propert Current value of the |
| 4.1 | Yes Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | the amount of any secucreditors Who Have Classifications. Current value of the entire property? Do not deduct secured | red claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. F |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | the amount of any secucreditors Who Have Classifications. Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule ims Secured by Propertured to the portion you own? |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any secucreditors Who Have Classifications. Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any secucreditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Class Current value of the | claims or schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the current value of the |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any secucreditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Class | claims on Schedule wired claims on Schedule wired by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule wired claims on Schedule wired claims Secured by Propert |
| 4.1 | Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any secucreditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Class Current value of the | claims or schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the portion you own? claims or exemptions. Fured claims on Schedule of the current value of the |
| 4.1 | Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secucreditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Class Current value of the | claims or exemptions. Fured claims on Schedule aims Secured by Property |

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| De | ebtor 1 | Lamon First Name | Middle Name | Felton Last Name | Case number (if known) | |
|-----------------|-------------------------|------------------------------|---|-------------------------------|----------------------------------|--|
| Pa | rt 3: | | our Personal and Household It | | | |
| D | o you | own or hav | e any legal or equitable interes | et in any of the following | g items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Examp | _ | and furnishings liances, furniture, linens, china, kitchen | nware | | |
| <u> </u> | No Yes. [| Describe | Used Furniture | | | \$500.00 |
| | | tronics bles: Televisions | s and radios; audio, video, stereo, and | digital equipment; compute | ers, printers, scanners; music | |
| <u></u> | Yes. [| Describe | TV, Laptop, I PAD, Tablet | | | \$1000.00 |
| | Examp | • | ue and figurines; paintings, prints, or othe in, or baseball card collections; other c | | • • | |
| | No Yes. [| Describe | | | | |
| | | les: Sports, ph | rts and hobbies otographic, exercise, and other hobby s; carpentry tools; musical instruments | | tables, golf clubs, skis; canoes | |
| ✓ | No Yes. [| Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and related | d equipment | | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| | 1. Clo Examp | | clothes, furs, leather coats, designer we | ear, shoes, accessories | | |
| | No | | | | | |
| ✓ | Yes. I | Describe | Misc. Clothing | | | \$300.00 |
| | | - | ewelry, costume jewelry, engagement er | rings, wedding rings, heirlod | om jewelry, watches, gems, | |
| ◩ | No Yes. [| Describe | | | | |
| | 2 Nor | n-farm animal | _ | | | |
| | Examp | | s, birds, horses | | | |
| ◩ | No Yes. [| Describe | | | | |
| ш | | | al a dha a balan a san a | | Land and the second | |
| 1 ~ | 4. Any No | other person | al and household items you did not | aiready list, including an | y nealth aids you did not list | |
| | Yes. [| Describe | | | | |
| | | | llue of all of your entries from Part 3 t number here | 3, including any entries fo | r pages you have attached | \$2100.00 |

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Felton Debtor 1 Lamon Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: American Airlines Federal Credit Union \$500.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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| Deb ⁻ | tor 1 Lamon | NA'-d-U- NI | Felton | Case number (if known) | |
|------------------|--|---|-----------------------------|---|----------|
| | First Name | Middle Name | Last Name | | |
| 20. | | orate bonds and other negotial include personal checks, cashiers | | | |
| | | ents are those you cannot transfe | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information about | Issuer name: | | | |
| | them | | | | |
| | | | | | - |
| | | | | | |
| | | | | | <u>-</u> |
| 21. | Retirement or pension Examples: Interests in IF | | thrift savings accoun | its, or other pension or profit-sharing plans | |
| | No No | ", Ellio, (100gli, 101(ly, 100(b) | , timit cavingo account | ne, or early periodic or prome origing plane | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | - | | . ——— |
| | | | | | |
| | | IRA: | - | | - |
| | | Retirement account: | | | - |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | _ | | |
| 22. | Security deposits and | | - | | |
| | | d deposits you have made so that with landlords, prepaid rent, public | | | |
| | companies, or others | with landiords, prepaid fent, public | c utilities (electric, gas, | water), telecommunications | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | | | |
| | _ | Gas: | | | |
| | | Heating oil: | | | • |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | - |
| | | Other: | | | - |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or f | or a number of years) | |
| | ✓ No | . , , , | , , | , , | |
| | Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | - |
| | | | | | <u>-</u> |

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| Debt | tor 1 Lamon | | Case number (if known) | |
|------|---|--|--|--|
| 2.4 | First Name Middle | | auglified state tuition program | |
| 24. | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 | count in a qualified ABLE program, or under a $\theta(b)(1)$. | quanned state tuition program. | |
| | √ No | | | |
| | Institution name and descr | iption. Separately file the records of any interests.1 | 1 U.S.C. § 521(c): | |
| | | | | |
| | | | | |
| | | | | |
| 25. | Trusts, equitable or future interests in | property (other than anything listed in line 1), | and rights or powers | |
| | exercisable for your benefit | | • | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 26. | | secrets, and other intellectual property | | |
| | Examples: Internet domain names, websit | es, proceeds from royalties and licensing agreeme | ents | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 27. | Licenses, franchises, and other genera | I <mark>l intangibles</mark> nses, cooperative association holdings, liquor licen | nece professional licenses | |
| | | ises, cooperative association fromings, iiquof iicen | ises, professional licerises | |
| | ✓ No Yes. Describe | | | |
| | | | | |
| | | | | |
| | | | | |
| Mon | ney or property owed to you? | | | Current value of the |
| Mon | ney or property owed to you? | | | Current value of the portion you own? Do not deduct secured |
| | | | | portion you own? |
| | Tax refunds owed to you | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you | Anticipated 2016 Tay Refund | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you | Anticipated 2016 Tax Refund | Federal: | portion you own? Do not deduct secured claims or exemptions. \$500.00 |
| | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns | Anticipated 2016 Tax Refund | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you No Yes. Give specific information about them, including whether | Anticipated 2016 Tax Refund | | portion you own? Do not deduct secured claims or exemptions. \$500.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, | Anticipated 2016 Tax Refund spousal support, child support, maintenance, dive | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, | | State: Local: orce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No | | State: Local: orce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No | | State: Local: orce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No | | State: Local: orce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No | | State: Local: orce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$500.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information | spousal support, child support, maintenance, divo | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insuran | spousal support, child support, maintenance, dive | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insuran Social Security benefits; unpaid | spousal support, child support, maintenance, divo | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insuran Social Security benefits; unpaid No | spousal support, child support, maintenance, dive | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insuran Social Security benefits; unpaid | spousal support, child support, maintenance, dive | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb ⁻ | tor 1 Lamon | | Felton | Case number (if known) | |
|------------------|--|-----------------------------|--|---|--|
| | First Name | Middle Nam | e Last Name | | |
| 31. | Interests in insurance Examples: Health, disab | | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | No Yes. Name the insure of each policy and | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | y of a living trust, expect | n someone who has died t proceeds from a life insurance polic | y, or are currently entitled to receive | , |
| | Yes. Describe | | | | |
| 33. | Examples: Accidents, el | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| | Yes. Describe | | | | |
| 34. | Other contingent and to set off claims | unliquidated claims o | f every nature, including counterd | claims of the debtor and rights | |
| | ✓ No Yes. Describe | | | | |
| 35. | Any financial assets y | ou did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | - | om Part 4, including any entries fo | | \$1000.00 |
| Part | 5: Describe Any B | usiness-Related Pr | operty You Own or Have an Iı | nterest In. List any real estate in Part | :1. |
| 37. | Do you own or have a | ny legal or equitable i | nterest in any business-related pr | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | p C | Current value of the cortion you own? On not deduct secured claims or exemptions |
| 38. | Accounts receivable | or commissions you al | ready earned | | · |
| | Yes. Describe | | | | |
| 39. | Office equipment, furn Examples: Business-rel | | re, modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, elect | ronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Debt | tor 1 Lamon | Felton | Case number (if known) | |
|--------|--|--|--------------------------------|--|
| ı | First Name Middle Nan | | | |
| 40. | Machinery, fixtures, equipment, supplies yo | ou use in business, and tools of your | trade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | I |
| | <u> </u> | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 10 | | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | Name of ontity | % of ownership: | |
| | Yes. Give specific | Name of entity: | % of ownership. | |
| | information about them | | | <u> </u> |
| | шеш | | | |
| | | | | |
| | | · . | | |
| 43. | Customer lists, mailing lists, or other compil | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identi | fiable information (as defined in 11 U.S | .C. § 101(41A))? | |
| | — No | | | |
| | No No Deceribe | | | |
| | Yes. Describe | | | |
| 44. | Any business-related property you did not a | already list | | |
| | | • | | |
| | No No | | | |
| | Yes. Give specific information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| | dd the dollar value of all of your entries from | | | |
| lor Pa | art 5. Write that number here | | | |
| Part | 6: Describe Any Farm- and Commer | cial Fishing-Related Property Y | ou Own or Have an Interest In. | |
| | If you own or have an interest in farmland, list | | | |
| 46. | Do you own or have any legal or equitable | interest in any farm- or commercial | fishing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims or exemptions |
| 47 | Farm animals | | | o. o.compuono |
| '' | Examples: Livestock, poultry, farm-raised fish | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | LI 165. Describe | | | |
| | | | | |

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| Debt | or 1 L | amon irst Name | Middle Name | Felton Last Name | Case number (if known) | |
|----------------|----------|--------------------------|---|-------------------------|------------------------------|--------------|
| 48. | Crop | s-either growing o | | | | |
| | | No Yes. Describe | | | | |
| 49. | ✓ | No | oment, implements, machinery, fixtu | res, and tools of trade | | |
| | | Yes. Describe | | | | |
| 50. | | | lies, chemicals, and feed | | | |
| | | Ves. Describe | | | | |
| 51. | Any f | farm- and comme | rcial fishing-related property you did | l not already list | | |
| | | No Yes. Describe | | | | |
| | <u></u> | res. Bescribe | | | | |
| | | | l of your entries from Part 6, includi here | | you have attached | |
| | - | No considera All Dura | | | | |
| Part 7 53. | | | perty You Own or Have an Inter perty of any kind you did not already | | OT LIST ADOVE | |
| 00. | Exam | | s, country club membership | not. | | |
| | | No Yes. Give specific | | | | |
| | | nformation | | | | |
| | | | | | | |
| 54. Ad | dd the | e dollar value of al | l of your entries from Part 7. Write t | hat number here | | <u> </u> |
| | | | | | | |
| | | | | | | |
| | | iot the Totals -4 | Each Part of this Form | | | |
| Part 8 | 3: L | ist the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: | : Total real estate | , line 2 | | > | |
| 56. p | art 2 | total vehicles, lin | e 5 | \$12475.00 | | |
| 57. P | art 3: | Total personal an | d household items, line 15 | \$2100.00 | | |
| 58. P | art 4: | Total financial as | sets, line 36 | \$1000.00 | | |
| 59. F | Part 5 | : Total business-re | elated property, line 45 | | | |
| | | | ishing-related property, line 52 | | | |
| | | | erty not listed, line 54 | | | |
| 62. T | otal p | personal property. | Add lines 56 through 61 | \$15575.00 | Copy personal property total | + \$15575.00 |
| 63. T e | otal o | f all property on S | chedule A/B. Add line 55 + line 62 | | | \$15575.00 |

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| Debtor 1 | Lamon | | Felton | Case number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Neme | Lact Namo | | |

Schedule A/B: Property. Additional page

| Part 3: Describe Y | Part 3: Describe Your Personal and Household Items | | | | | | | |
|--------------------|---|--|--|--|--|--|--|--|
| Do you own or hav | ve any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | | |
| 7.2. Electronics | | | | | | | | |
| No | | | | | | | | |
| Yes. Describe | I Phone | \$300.00 | | | | | | |

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| Fill in | this information to identify your cas | se: | | |
|---|--|--|--|--|
| Debto | or 1 Lamon | | Felton | |
| | First Name | Middle Name | Last Name | |
| Debto Spous | e, if filing) First Name | Middle Name | Last Name | |
| Jnite | d States Bankruptcy Court for the: | Northern | District of Illinois | |
| 2000 | number | | (State) | |
| lf knov | | | | <u>_</u> |
| Off | icial Form 106C | | | Check if this i amended filin |
| Sch | edule C: The Prope | ertv You Claim | as Exempt | 12 |
| tate | a specific dollar amount as a | xempt. Alternatively, yo | ou may claim the full fair market va | alue of the property being exempted up |
| ne ai ax-e ndei our c | mount of any applicable statu xempt retirement funds—may r a law that limits the exempti exemption would be limited to 1: Identify the Property You | ntory limit. Some exemply be unlimited in dollar ion to a particular dollar the applicable statute. Claim as Exempt | amount. However, if you claim an ramount and the value of the prop | ds, rights to receive certain benefits, an exemption of 100% of fair market value perty is determined to exceed that amou |
| ne ai ax-e ndei our (Part | mount of any applicable statu xempt retirement funds—may r a law that limits the exempti exemption would be limited to 1: Identify the Property You | tory limit. Some exemply be unlimited in dollar ion to a particular dollar the applicable statuto Claim as Exempt | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. | ds, rights to receive certain benefits, an exemption of 100% of fair market value |
| ne ai ax-e ndei our (Part | mount of any applicable statu xempt retirement funds—may r a law that limits the exempti exemption would be limited to 1: Identify the Property You Which set of exemptions are you | ntory limit. Some exemply be unlimited in dollar ion to a particular dollar the applicable statuto. Claim as Exempt claiming? Check one only, and deral nonbankruptcy exempt | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) | ds, rights to receive certain benefits, an exemption of 100% of fair market value |
| ne ar ax-e nder our c Part | mount of any applicable statu xempt retirement funds—may r a law that limits the exempti exemption would be limited to It Identify the Property You Which set of exemptions are you of You are claiming state and fed You are claiming federal exem | tory limit. Some exemply be unlimited in dollar ion to a particular dollar the applicable statuto. Claim as Exempt Claiming? Check one only, ederal nonbankruptcy exemptions. 11 U.S.C. § 522(b) | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) | ds, rights to receive certain benefits, an exemption of 100% of fair market value |
| ne all ax-e all ax-e nder our of art line line line line line line line line | mount of any applicable statu xempt retirement funds—may r a law that limits the exempti exemption would be limited to It Identify the Property You Which set of exemptions are you of You are claiming state and fed You are claiming federal exem | tory limit. Some exemply be unlimited in dollar ion to a particular dollar the applicable statuto. Claim as Exempt claiming? Check one only, elderal nonbankruptcy exemptions. 11 U.S.C. § 522(b) tule A/B that you claim as | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | ds, rights to receive certain benefits, an exemption of 100% of fair market value perty is determined to exceed that amount of the second seco |
| ne an ax-e. nder our of art | mount of any applicable statu xempt retirement funds—may r a law that limits the exemptic exemption would be limited to limited to limite the limite to limite to limite to limite to limite. It is limited to limite l | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt Claiming? Check one only, and the applicable statute of the portion you own Copy the value from | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | ds, rights to receive certain benefits, an exemption of 100% of fair market value perty is determined to exceed that amount of the second seco |
| ne an ax-e. nder our of art li. \ | mount of any applicable statu xempt retirement funds—may real aw that limits the exemption would be limited to be seemption would be limited to | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt Claiming? Check one only, and the applicable statute of the portion you own Copy the value from | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | ds, rights to receive certain benefits, an exemption of 100% of fair market value overty is determined to exceed that amount of the second sec |
| ne an ax-e. | mount of any applicable statu xempt retirement funds—may r a law that limits the exemption would be limited to limited to limite the exemption would be limited to limited to limited to limite to limite limited to limited | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt Elaiming? Check one only, eleral nonbankruptcy exemptions. 11 U.S.C. § 522(b) fulle A/B that you claim as the portion you own Copy the value from Schedule A/B | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filling with you. Inptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 10 \$300.00 | ds, rights to receive certain benefits, an exemption of 100% of fair market value perty is determined to exceed that amount of the specific laws that allow exemption. 735 ILCS 5/12-1001(a) |
| e anne anne anne anne anne anne anne an | mount of any applicable statu xempt retirement funds—may real aw that limits the exemption would be limited to exemption would be limited to limited to limite the exemption would be limited to limited lim | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt claiming? Check one only, exemptions. 11 U.S.C. § 522(b) fulle A/B that you claim as the portion you own Copy the value from Schedule A/B | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filling with you. Apptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption | ds, rights to receive certain benefits, an exemption of 100% of fair market value perty is determined to exceed that amount of the specific laws that allow exemption. 735 ILCS 5/12-1001(a) |
| e an | mount of any applicable statu xempt retirement funds—may real aw that limits the exemption would be limited to exemption would be limited to limited to limite the exemption would be limited to limit | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt claiming? Check one only, exemptions. 11 U.S.C. § 522(b) fulle A/B that you claim as the portion you own Copy the value from Schedule A/B | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filing with you. Inptions. 11 U.S.C. § 522(b)(3) Inptions. 11 U.S.C. § 522(b)(3) Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption Input of the exemption you claim Should be exemption you claim Check only one box for each exemption Input of the exemption you claim Should be exemption you claim Check only one box for each exemption Input of the exemption you claim Check only one box for each exemption | ds, rights to receive certain benefits, an exemption of 100% of fair market value exerty is determined to exceed that amount of the second sec |
| e anne anne anne anne anne anne anne an | mount of any applicable statu xempt retirement funds—may real aw that limits the exemption would be limited to exemptions are you or you are claiming state and feed. You are claiming federal exemptions are you or any property you list on Schedule and feeds are description of the property a sine on Schedule A/B that lists this property. Brief description: Misc. Clothing Line from Schedule A/B: Brief | tory limit. Some exemply be unlimited in dollar ion to a particular dollar to the applicable statute. Claim as Exempt Claiming? Check one only, and the prize of the portion as the portion you own Copy the value from Schedule A/B \$300.00 | amount. However, if you claim an ir amount and the value of the property amount. Even if your spouse is filling with you. Inptions. 11 U.S.C. § 522(b)(3) (2) exempt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption 10 \$300.00 | Specific laws that allow exemption 735 ILCS 5/12-1001(b) |

☐ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Felton Debtor 1 Lamon Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$1,000.00 description: **✓** \$1,000.00 TV, Laptop, I PAD, 100% of fair market value, up to any Tablet applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$300.00 description: **✓** \$300.00 I Phone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$500.00 description: \$120.00 Checking account, 100% of fair market value, up to any **American Airlines** applicable statutory limit **Federal Credit Union** Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 Federal, Anticipated 100% of fair market value, up to any 2016 Tax Refund

applicable statutory limit

Line from Schedule A/B:

28

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| Fill in | this information to identify your ca | se: | | | | |
|------------------|---|---|-----------------------------|-----------------------------------|---------------------|-----------------------------------|
| Debto | or 1 Lamon | E. | elton | | | |
| Debto | or 1 <u>Lamon</u> First Name | | ast Name | | | |
| Debto | | | | | | |
| (Spous | ee, if filing) First Name | Middle Name La | ast Name | | | |
| Unite | d States Bankruptcy Court for the: | Northern District | of Illinois | | | |
| Case (If knov | number vn) | | (State) | | | |
| | icial Form 106D | | | | | Check if this is a amended filing |
| | hedule D: Credito | ors Who Have C | laims Secure | d by Pron | | 12/1 |
| | complete and accurate as possib | | | | | |
| more | space is needed, copy the Addition | • • | | • | | |
| | and case number (if known). | | | | | |
| 1. | Do any creditors have claims se | | other ashedules. Vou boy | o nothing also to ran | ort on this form | |
| | | it this form to the court with your o | other schedules. You hav | e nothing eise to rep | ort on this form. | |
| | Yes. Fill in all of the information | 1 Delow. | | | | |
| Part | 1: List All Secured Claims | | | | | |
| 2. | | or has more than one secured claim | | Column A | Column B | Column C |
| | | an one creditor has a particular clair the claims in alphabetical order acco | | Amount of claim Do not deduct the | Value of collateral | Unsecured portion |
| | name. | · | J | value of collateral. | that supports | If any |
| 2.1 | OVERLND BOND | . | | \$23,324.00 | \$12,475.00 | \$10,849.00 |
| <u>1</u> | Creditor's Name | Describe the property that secu | ures the claim: | Ψ20,024.00 | Ψ12,470.00 | <u>Ψ10,043.0</u> 0 |
| | 4701 W FULLERTON Number Street | 2013 Dodge Avenger As of the date you file, the clair | n is: Check all that apply. | | | |
| | | Contingent | , | | | |
| | CHICAGO IL 60639 | Unliquidated | | | | |
| | City State ZIP Code | Disputed | | | | |
| | Who owes the debt? Check one. Debtor 1 only | Nature of lien. Check all that app | lv. | | | |
| | Debtor 2 only | An agreement you made (suc | | | | |
| | Debtor 1 and Debtor 2 only | car loan) | do mongago er cocarca | | | |
| | At least one of the debtors | Statutory lien (such as tax lien | ı, mechanic's lien) | | | |
| | and another | Judgment lien from a lawsuit | | | | |
| | Check if this claim relates to a community debt | Other (including a right to offs | set) | | | |
| | Date debt was 2/1/2016 incurred | Last 4 digits of account numbe | r <u>6122</u> | | | |
| 2.2 | AAFCU Creditor's Name | Describe the property that secu | ures the claim: | \$380.00 | \$500.00 | \$0.00 |
| | 10600 W Higgins Rd Ste 100 | 004 InstallmentLoan | | | | |
| | Number Street | As of the date you file, the clair | m is: Check all that apply. | | | |
| | | Contingent | | | | |
| | Rosemont IL 60018 City State ZIP Code | Unliquidated | | | | |
| | Who owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Nature of lien. Check all that app | ly. | | | |
| | Debtor 2 only | An agreement you made (suc car loan) | h as mortgage or secured | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors | Statutory lien (such as tax lien | , mechanic's lien) | | | |
| | and another | Judgment lien from a lawsuit | | | | |
| | Check if this claim relates to a community debt | Other (including a right to offs | set) | | | |
| | Date debt was 11/1/2016 incurred | Last 4 digits of account numbe | r0002 | | | |
| | Add the dollar value of y here: | our entries in Column A on this p | age. Write that number | \$23,704.00 | | |

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| Fill in this info | rmation to identify your c | ase: | | | |
|--|---|---|--|--|---|
| Debtor 1 | Lamon | | Felton | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Nesses | L and Name a | | |
| (Spouse, Il Illing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official F | Form 106E/F | | | | Check if this is an amended filing |
| | | | | | |
| Sched | ule E/F: Cre | editors Who | Have Unseco | ured Claims | 12/15 |
| other party to Form 106A/B) claims that a the entries in known). | any executory contracts and on Schedule G: Exe re listed in Schedule D: C | s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa | t could result in a claim. Als expired Leases (Official For s Secured by Property. If mo | so list executory contracts on the second of | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured ne Part you need, fill it out, number ite your name and case number (if |
| | | secured claims against y | ou? | | |
| ✓ No. | Go to Part 2. | | | | |
| Yes | , | | | | |
| 2. List all | . | | | | |

Total

claim

Priority

amount

Nonpriority

amount

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| Debt | tor 1 Lamon | Felton | Case number (if known) | |
|------|--|------------------------|--|-------------------|
| | First Name Middle Name | Last Name | | |
| Part | 2: List All of Your NONPRIORITY Unsecure | ed Claims | | |
| ļ | Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Su Yes. | • | court with your other schedules. | |
| 1 | unsecured claim, list the creditor separately for each claim | aim. For each claim li | r of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou | cluded in Part 1. |
| | | | | Total claim |
| 4.1 | AAFCU Nonpriority Creditor's Name 10600 W Higgins Rd Ste 100 | | Last 4 digits of account number 8472 When was the debt incurred? 5/1/2016 | \$60.00 |
| | Number Street | | | |
| | | 0018 o Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify UnknownLoanType | |
| 4.2 | ATG CREDIT | | Last 4 digits of account number 3577 | \$915.00 |
| | City State Zip Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community of sthe claim subject to offset? ✓ No Yes | 0622 o Code debt | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: SOUTH Other. Specify SUBURBAN COLLEGE | |
| 4.3 | Bell Subrogation Services Nonpriority Creditor's Name | | Last 4 digits of account number | \$3,514.50 |
| | 1411 N Westshore Blvd, Suite 100 Number Street Tampa Florida 33 | 8607 o Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Due | |
| | ✓ No Yes | | | |

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Case number (if known) Debtor 1 Lamon First Name Felton Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning with | n 4.5, followed by 4.6, and so forth. | Total claim |
|-----|--|---|-------------|
| 4.4 | City of Chicago Parking | Last 4 digits of account number | \$3,000.00 |
| | Nonpriority Creditor's Name 121 N. LaSalle St # 107A | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | | = * | |
| | Chicago Illinois 60602 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Tickets | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.5 | CNAC SH INC/JDB | Last 4 digits of account number 5379 | \$10,666.00 |
| | Nonpriority Creditor's Name 300 W. 162nd St. | When was the debt incurred? 8/1/2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | South Holland Illinois 60473 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | CONVERGENT OUTSOURCING | Last 4 digits of account number 6571 | \$641.00 |
| | Nonpriority Creditor's Name Po Box 9004 | When was the debt incurred? 8/1/2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Renton Washington 98057 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for | |
| | ✓ No | ORIGINAL CREDITOR: Other Specify COMCAST | |

Yes

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 Debtor 1 First Name
 Lamon
 Felton
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - | Continuation Page | |
|--------|--|--|-------------|
| | After listing any entries on this page, number the | m beginning with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | CONVERGENT OUTSOURCING | Last 4 digits of account number 3570 | \$499.00 |
| | Nonpriority Creditor's Name Po Box 9004 | When was the debt incurred? 11/1/2013 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Renton Washington 980 | ————— I I I I I I I I I I I I I I I I I | |
| | City State Zip Who incurred the debt? Check one. | Code Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community de | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | |
| | ✓ No | ORIGINAL CREDITOR: Other. Specify COMCAST | |
| | Yes | ' | |
| 4.8 | CREDIT MANAGEMENT LP | Last 4 digits of account number 8880 | \$568.00 |
| | Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY | When was the debt incurred? 5/1/2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | CARROLLTON Texas 750 | 07 Unliquidated | |
| | City State Zip Who incurred the debt? Check one. | Code Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community de | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for | |
| | ✓ No | ORIGINAL CREDITOR: WOW Other. Specify INTERNET CABLE PHONE - 1 | |
| | Yes | | |
| 4.9 | Illinois Tollway | Last 4 digits of account number | \$1,000.00 |
| | Nonpriority Creditor's Name 2700 Ogden Ave | When was the debt incurred? | |
| | Number Street | | |
| | Legal Dept | As of the date you file, the claim is: Check all that apply. Contingent | |
| | | Unliquidated | |
| | Downers Grove Illinois 605 City State Zip | 15 Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community de | | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |

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Felton Debtor 1 Lamon Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Majestic Lake Financial Inc \$700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 635 East Highway 20 # K As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 95485 Upper Lake California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Due Is the claim subject to offset? **✓** No Yes 4.11 **ROGERS & HOL** \$977.00 1002 Last 4 digits of account number ___ Nonpriority Creditor's Name 12/1/2013 When was the debt incurred? PO BOX 879 Number As of the date you file, the claim is: Check all that apply. Contingent MATTESON 60443 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.12 Speedy Cash \$800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 1931 N. Mannheim Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60160 Melrose Park Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ Due Is the claim subject to offset? **✓** No

Yes

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| Debtor | 1 Lamon First Name | Middle Name | Felton Last Name | Case number (if known) | |
|---------|--|--|---------------------|--|-------------|
| Part 2: | Your NONPRIORITY U | Insecured Claims - | Continuation P | age | |
| | After listing any entries on | this page, number the | em beginning with | 4.5, followed by 4.6, and so forth. | Total claim |
| | TRNTY/ST LNS Nonpriority Creditor's Name 2065 Half Day Rd, Deerfield Number Street | | | Last 4 digits of account number 8800 When was the debt incurred? 3/1/2015 As of the date you file, the claim is: Check all that apply. | \$2,869.00 |
| | | eck one. nly rs and another ates to a community d | Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 1 InstallmentLoan | |

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| Debtor | 1 Lamon First Nam | e | Middle Name | Felton Last Name | Case nu | umber (if known) |
|-----------------|--|--|--|---|---|--|
| Part 3: | List Ot | hers to Be Notified A | About a Debt That Y | ou Already Liste | ed | |
| co co cre | llection a llection a editors he | gency is trying to colle gency here. Similarly, i | ct from you for a debt f you have more than | you owe to someo one creditor for an | ne else, list the or y of the debts that | u already listed in Parts 1 or 2. For example, if a riginal creditor in Parts 1 or 2, then list the tyou listed in Parts 1 or 2, list the additional 2, do not fill out or submit this page. |
| | ame | AIIIIO LID | | On which entr | y in Part 1 or Part | 2 did you list the original creditor? |
| <u>11</u> | 11 W JAC | (SON BLVD S-400 | | Line 4.4 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Nu | umber | Street | | _ | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| CI | HICAGO | Illinois | 60604 | Last 4 digits of | f account number | |
| Ci | ity | State | Zip Code | | | |

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Debtor 1 Lamon Felton Case number (if known)

Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$26,209.50 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$26,209.50 6j. Total. Add lines 6f through 6i.

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| Fill in this infor | mation to identify your c | ase: | | |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | Lamon | | Felton | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | DC | cument ray | C 33 C | 170 |
|--------------|---------------|-----------------------------|---|---------------------------|-------------|--|
| Fill in | this infor | mation to identify your c | ase: | | | |
| Debto | or 1 | Lamon | | Felton | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | | = | | | | |
| (Spous | e, if filing) | First Name | Middle Name | Last Name | | |
| United | d States E | Sankruptcy Court for the: | Northern | District of Illinois | | |
| Case | number | | | (State) | | |
| (If know | | | | | | |
| | | | | | | Check if this is an |
| ~ *** | | | | | | amended filing |
| Offi | icial | Form 106H | | | | |
| Cab | | - U. Vaux Ca | labtava | | | |
| <u>Scn</u> | ieaui | e H: Your Cod | leptors | | | 12/15 |
| tnown | ı). Answe | r every question. | tach the Additional Page | . • | | Additional Pages, write your name and case number (if or.) |
| | | | lived in a community proxico, Puerto Rico, Texas, W | | | unity property states and territories include Arizona, California, |
| Ŀ | | Go to line 3. | | | | |
| | | | er spouse, or legal equiva | lent live with you at the | time? | |
| | ✓ | No | | | | |
| | | Yes. In which communit | y state or territory did you | ı live? | Fill i | n the name and current address of that person. |
| | | | | | | |
| | | Name of your spouse, f | ormer spouse, or legal equ | valent | | |
| | | Number Street | | | | |
| | | | | | | |
| | | City | State | Zip C | ode | |
| 3. Ir | n Column | ı 1, list all of your codel | otors. Do not include you | · spouse as a codebtoi | r if your s | pouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 200 | | ago o i | | | |
|--------------------------------|---------------------------|---|------------------------------|----------------|-------------------|-----------------------------|-------------------------|
| Fill in this in | formation to identify | your case: | | | | | |
| Debtor 1 | Lamon | | Felton | | | | |
| | First Name | Middle Name | Last Nam | е | Che | eck if this is: | |
| Debtor 2 (Spouse, if filing | i) Firet Name | Middle Name | Last Nam | ΙΔ | - | An amended filing | |
| | | | | | | A supplement showing p | ost-petition chapter 13 |
| the: | Bankruptcy Court for | Northern | District of Illinoi | | - " | expenses as of the follow | |
| Case number | | | , | <u></u> | _ | MM / DD / YYYY | |
| (ii Kilowii) | | | | | | MINI/DD/YYYY | |
| Official | Form 106I | | | | | | |
| Schodu | le I: Your In | come | | | | | 40/41 |
| Scriedu | ie i. Tour iii | COITIE | | | | | 12/15 |
| | | s possible. If two marrie at information. If you are | | | | | |
| information | about your spouse. | If you are separated and | d your spouse i | is not filing | with you, do | not include informati | on about your |
| - | - | l, attach a separate she | et to this form. | On the top | of any addit | ional pages, write you | ur name and case |
| number (if k | nown). Answer ever | y question. | | | | | |
| Part 1: De | escribe Employme | nt | | | | | |
| r art ii De | Scribe Employmen | | | | | | |
| | | | Debtor 1 | | | Debtor 2 | |
| 1. Fill in you informati | ur employment on. | | Donto. 1 | | | 200101 2 | |
| If you hav | ve more than one job, | Employment status | ✓ Employed | i | | Employed | |
| attach a s | eparate page with | | Not Empl | oyed | | ✓ Not Employed | |
| employers | on about additional S. | Occupation | | | | | |
| Include pa | art time, seasonal, or | Employer's name | Envoy Air Inc | | | _ | |
| self-emplo | oyed work. | Employer's address | | | | _ | |
| | on may include student | Linployer's address | 4333 Amon C Number Street | Carter Blvd | | Number Street | |
| or nomen | naker, if it applies. | | | | | _ | |
| | | | | | | | |
| | | | Fort Worth | Texas | 76155 | _ | _ |
| | | | City | State | Zip Code | City | State Zip Code |
| | | How long employed | 2 years | | | | |
| | | there? | | | | | |
| 5 10 0: | D . " AI | | | | | | |
| Part 2: Gr | ve Details About N | Monthly Income | | | | | |
| Estimate m | onthly income as of | the date you file this forn | n If you have not | thing to reno | rt for any line | write \$0 in the space. Inc | lude vour non-filing |
| | ss you are separated. | une date you me uns form | II. II you have not | umg to repo | it ioi aily iile, | write wo in the space. The | lade your non-illing |
| | | e more than one employer, | combine the info | ormation for a | all employers fo | or that person on the lines | s below. If you need |
| more space | , attach a separate she | eet to this form. | | | | For Debtor 2 or | |
| | | | | For E | Debtor 1 | non-filing spouse | |
| | | ary, and commissions (befo | | | \$2,024.64 | \$0.00 | <u>0</u> |
| be. | ons.) ii not paid monting | , calculate what the monthly | wage would | | | | |
| 3. Estima | te and list monthly ove | rtime pay. | 3. | | + \$0.00 | + \$0.00 | 0 |

\$2,024.64

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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| Debtor | | lton | Case number | | |
|-------------------------|--|-------------------|---------------------------|-----------------------------------|-------------------------------------|
| | First Name Middle Name Las | st Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Сору | line 4 here | → 4. | \$2,024.64 | \$0.00 | |
| 5. List a | all payroll deductions: | | | | |
| 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$212.75 | \$0.00 | |
| 5b. N | Mandatory contributions for retirement plans | 5b. | \$0.00 | \$0.00 | |
| 5c. V | oluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 | |
| 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 | |
| 5e. l ı | nsurance | 5e. | \$54.17 | \$0.00 | |
| 5f. D | omestic support obligations | 5f. | \$0.00 | \$0.00 | |
| 5g. l | Jnion dues | 5g. | \$21.10 | \$0.00 | |
| 5h. C | Other deductions. Specify: | 5h. + | \$104.17 + | \$0.00 | |
| 6. Add t +5h. | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + | 5g 6. | \$392.19 | \$0.00 | |
| 7. Calcu | ulate total monthly take-home pay. Subtract line 6 from line 4 | . 7. | \$1,632.45 | \$0.00 | |
| 8. List a | Ill other income regularly received: | | | | |
| b | let income from rental property and from operating a business, profession, or farm | | | | |
| g | attach a statement for each property and business showing pross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$1,000.00 | \$0.00 | |
| 8b. I I | nterest and dividends | 8b. | \$0.00 | \$0.00 | |
| | amily support payments that you, a non-filing spouse, or a lependent regularly receive | | _ | | |
| | nclude alimony, spousal support, child support, maintenance, livorce settlement, and property settlement. | 8c. | \$0.00 | \$0.00 | |
| 8d. L | Jnemployment compensation | 8d. | \$0.00 | \$0.00 | |
| 8e. S | ocial Security | 8e. | \$0.00 | \$0.00 | |
| In ca ui h | ther government assistance that you regularly receive actude cash assistance and the value (if known) of any non-ash assistance that you receive, such as food stamps (benefits ander the Supplemental Nutrition Assistance Program) or ousing subsidies pecify: | 8f. | \$0.00 | \$0.00 | |
| 8g. F | Pension or retirement income | 8g. | \$0.00 | \$0.00 | |
| 8h. C | Other monthly income. Specify: | 8h. + | \$0.00 + | \$0.00 | |
| 9. Add a | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8 | sh. 9. | \$1,000.00 | \$0.00 | |
| | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spo | 10. use | \$2,632.45 + | \$0.00 = | \$2,632.45 |
| Inclu friend | te all other regular contributions to the expenses that you lide contributions from an unmarried partner, members of your holds or relatives. ot include any amounts already included in lines 2-10 or amoun | ousehold, your c | ependents, your roomn | | |
| Spec | ify: | | | 11 | 1. +\$0.00 |
| | the amount in the last column of line 10 to the amount in I | | | • | |
| Write | that amount on the Summary of Schedules and Statistical Sumi | mary ot Certain L | iabilities and Related Da | tta, it it applies | \$2,632.45 Combined monthly income |
| | you expect an increase or decrease within the year after yo No. Yes. Explain: | u file this form? | | | |
| Ш | | | | | |

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Debtor 1 Lamon Felton Case number (if First Name Middle Name Last Name known)

Part 2: Give Details About Monthly Income

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---------------------------------------|--------------|-----------------------------------|
| 5h.Other payroll deductions. Specify: | | |
| 1. Dental | \$8.65 | \$0.00 |
| 2. Healthcare | \$89.92 | \$0.00 |
| 3. Vision | \$5.61 | \$0.00 |

Official Form 106l Schedule I: Your Income page 3

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| | | Docu | ument Page 37 of 7 | 0 | |
|------------------------------------|--|--|--|-------------------------------------|---------------------------------|
| Fill in this infor | mation to identify you | ur case: | | | |
| Debtor 1 | Lamon First Name | Middle Name | Felton Last Name | | |
| Debtor 2 (Spouse, if filing) | | | | Check if this is: An amended filir | na |
| | First Name Bankruptcy Court for tl | Middle Name he: Northern | Last Name District of Illinois | 브 | howing post-petition chapter 13 |
| | sankruptcy Court for the | ne. <u>Northern</u> | (State) | expenses as of | the following date: |
| Case number (If known) | | | | MM / DD / YYYY | |
| Official | Form 106 | J | | | |
| Schedul | e J: Your Ex | - (penses | | | 12/15 |
| information. If | • | | re filing together, both are equal form. On the top of any addition | | |
| Part 1: Des | cribe Your House | hold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. D | oes Debtor 2 live in a | a separate household? | | | |
| | No | | | | |
| | Yes. Debtor 2 mus | st file Official Forms 106J-2, <i>Expel</i> | nses for Separate Household of Deb | tor 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | penses include f people other | No | | | |
| than yourself and dependents | _ | Yes | | | |
| · · | | as Manthh. Company | | | |
| | _ | ng Monthly Expenses | | | |
| _ | of a date after the ba | | you are using this form as a supp oplemental Schedule J, check th | • | • |
| | | n-cash government assistance d it on <i>Schedule I: Your Income</i> | | | Your expenses |
| | I or home ownership or the ground or lot. 4 | | nclude first mortgage payments and | | \$500.00 |
| | uded in line 4: | | | | |

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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| FIISUNAINE | Mildule Name Last Name | | |
|---|--|------------|------------------|
| | | | Your expenses |
| 5. Additional mortgage paymen | ts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$325.00 |
| 6b. Water, sewer, garbage colle | ection | 6b. | \$60.00 |
| 6c. Telephone, cell phone, Inte | rnet, satellite, and cable services | 6c. | \$230.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supp | lies | 7. | \$500.00 |
| 8. Childcare and children's edu | cation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cle | paning | 9. | \$200.00 |
| 10. Personal care products and | services | 10. | \$200.00 |
| 11. Medical and dental expense | s | 11. | \$150.00 |
| 12. Transportation. Include gas, Do not include car payments | maintenance, bus or train fare. | 12. | \$275.00 |
| 13. Entertainment, clubs, recre | ation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions an | d religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dedu | cted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes d | educted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease paymer | nts: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17c. Other. Specify: Wife's Ca | ar Payment | 17c | \$200.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| | naintenance, and support that you did not report as deducted from | | \$0.00 |
| | e I, Your Income (Official Form 106I). | 18. | |
| | o support others who do not live with you. | | |
| Specify: | and included in lines 4 on 5 of this form on an Cahadula I. Verminana | 19. | \$0.00 |
| 20. Other real property expense 20a. Mortgages on other property | s not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 200 | \$0.00 |
| 20b. Real estate taxes. | v | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, o | ur renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c | \$0.00 |
| 20e. Homeowner's association | | 20d | \$0.00 |
| 206. HOMEOWITELS association | or concommute duca | 20e | \$0.00 |

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| Debtor 1 Lamo | | | Felton | Case number (if known) | | |
|-----------------|--|----------------------------|--|------------------------|-----|------------|
| First N | ame | Middle Name | Last Name | | | |
| 21. Other. Spec | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expense | es. | | | | \$2,640.00 |
| 22a. Add lin | es 4 through 21. | | | \$0.00 | | |
| 22b. Copy I | ine 22 (monthly expens | 2 | | \$2,640.00 | | |
| 22c. Add lin | e 22a and 22b. The res | sult is your monthly expe | enses. | | 22. | |
| 23. Calculate y | our monthly net inco | me. | | | | |
| 23a. Copy li | ne 12 (your combined | monthly income) from S | Schedule I. | | 23a | \$2,632.45 |
| 23b. Copy y | our monthly expenses | from line 22 above. | | | 23b | \$2,640.00 |
| | | ses from your monthly in | come. | | | (\$7.55) |
| The re | sult is your monthly net | t income. | | | 23c | |
| For examp | le, do you expect to fini payment to increase or o Explain here: | ish paying for your car lo | pes within the year after oan within the year or do y nodification to the terms o utilities | ou expect your | | |

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| Fill in this information to identify your case: | | | | | | |
|---|------------|-----------------------|------------------------------|--|--|--|
| Debtor 1 | Lamon | Felton | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name Last Name | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Glais) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | |
|-----|---|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | | | | | |
| x | /s/ Lamon Felton | × | | | | | |
| • | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 1/10/2017 | Date | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | |

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| Fill i | n this ir | nformation | to identify your | case: | | | | | | |
|-----------------|---------------|-----------------------|---------------------|---------------------|---|------------------------|--------------|-------------|--------------------|--|
| Deb | tor 1 | Lamo | | | | elton | | | | |
| Deb | tor 2 | First | Name | Middle | Name La | ast Name | | | | |
| (Spot | use, if filin | ng) First | Name | Middle | Name La | ast Name | | | | |
| Unit | ed State | es Bankrup | tcy Court for the: | Northern | District | of Illinois (State) | | | | |
| Case (If knd | e numb | oer | | | | (Glate) | | | | |
| , | | - L C | 107 | | | | | | | Check if this is a |
| OT | TICIE | al For | m 107 | | | | | | | amended filing |
| Sta | atem | nent o | f Financia | al Affairs | for Individu | ıals Filir | ng for E | Bankru | ptcy | 12/1 |
| info | rmatio | n. If more | | ed, attach a sep | narried people are parate sheet to thi | | | | | upplying correct your name and case |
| Par | t 1: G | ive Deta | ils About Your | Marital Status | and Where You | Lived Befor | re | | | |
| 1. | What | t is your c | urrent marital st | atus? | | | | | | |
| | | Married | | | | | | | | |
| | | Not marrie | ed | | | | | | | |
| 2. | Durir | ng the last | 3 years, have y | ou lived anywher | e other than where | e you live now | 1? | | | |
| | | No | | | | | | | | |
| | Ľ | | ll of the places y | ou lived in the las | st 3 years. Do not in | clude where | you live now | <i>I</i> . | | |
| | | | | | | | | | | |
| | | Debtor 1: | | | Dates Debtor 1 there | lived Del | btor 2: | | | Dates Debtor 2 lived there |
| | | | | | | | Same as De | ebtor 1 | | Same as Debtor 1 |
| | | | | | | | | | | Ы |
| | • | Number St | reet | | From | Nur | mber Street | | | From |
| | • | | | | То | _ | | | | То |
| | | City | State | Zip Code | | City | / | State | Zip Code | |
| | | | | | | | Same as De | ebtor 1 | | Same as Debtor 1 |
| | | | | | From | | | | | From |
| | | Number St | reet | | To To | Nur | mber Street | | | To |
| | | | | _ | | | | | | |
| | _ | City | State | Zip Code | | City | / | State | Zip Code | |
| 3. | | | | | | | | | - ' | nmunity property states |
| | and ter | <i>rritories</i> incl | ude Arizona, Calif | ornia, Idaho, Loui | siana, Nevada, New | Mexico, Puerto | Rico, Texas | , Washingto | n, and Wisconsin.) | |
| | No. | | | lahadula U.M. | Codobt (Off.) | Farr 1001 " | | | | |
| | □ Y6 | es. iviake s | sure you till out S | criedule H: Your | Codebtors (Officia | ıı Form 106H). | | | | |

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Case number (if known)

Felton

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$33604.53 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$32000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Lamon

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Felton Debtor 1 Lamon __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | Lamon | | | Fel | lton | Case number | (if known) |
|--------------------|---|--|---|---|--|---|--|
| | First Name | | Middle Name | Las | st Name | | |
| Insi com age | ders include your porations of whicl | relatives; a n you are a for a busin | ny general partners n officer, director, l ess you operate as | s; relatives of any person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? ou are a general partner; securities; and any managing domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | | ranteed or cosigne t benefited an ins | - | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | | | | | |
| | | | Zip Code | | | | |
| | Insider's Name | | Zip Code | | | | |
| | Insider's Name Number Street | | Zip Code | | | | |
| | | State | Zip Code | | | | |

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Felton Debtor 1 Lamon Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Lamon | Felton | Case number (if known) | |
|------|---|-----------------------------|---|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | pank or financial institution, set off any am | ounts from your |
| | Yes. Fill in the details. | | | |
| | Too. Tim in the declare. | Describe the action th | e creditor took Date action was taken | Amount |
| | | | | |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | | · · | | |
| | | | | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official | | possession of an assignee for the benefit o | f creditors, a court- |
| | No. | | | |
| | ✓ No | | | |
| | Yes | | | |
| Part | List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ,oa.o 201010 ,oaoa 10: 2aap10,, a.a. | , ou g o u, g o | our rando or more man que e per person. | |
| | ✓ No | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| | Lamon | Felton Case number (if k | nown) | |
|----------|--|---|---|--------------------|
| | First Name Middle Name | Last Name | · - | |
| | | | | |
| Wit | hin 2 years before you filed for bankruptcy, d | id you give any gifts or contributions with a total valu | ie of more than \$600 | to any charity? |
| V | No | | | |
| Ė | Yes. Fill in the details for each gift or contribu | ition | | |
| ш | - | | | |
| | Gifts or contributions to charities | Describe what you contributed | Date you | Value |
| | that total more than \$600 | | contributed | |
| | | | | |
| | Charity's Name | _ | | |
| | | | | |
| | | | | |
| | Number Street | _ | | |
| | | | | |
| | City State Zip Code | | | |
| | | | | |
| 6: | List Certain Losses | | | |
| | | | | |
| | | since you filed for bankruptcy, did you lose anything b | pecause of theft, fire, | other disaster, or |
| gar | nbling? | | | |
| V | No | | | |
| Ħ | Yes. Fill in the details. | | | |
| Ш | | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your | Value of property |
| | now the loss occurred | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule</i> | loss | lost |
| | | A/B: Property. | | |
| | | | | |
| | | | | |
| 7: | List Certain Payments or Transfers | | | |
| | | or credit counseling agencies for services required in you | r bankruptcy. | |
| | No Yes. Fill in the details. | or credit counseling agencies for services required in you | r bankruptcy. | |
| | | or credit counseling agencies for services required in you Description and value of any property | r bankruptcy. Date payment | Amount of |
| | | | Date payment or transfer | Amount of payment |
| | Yes. Fill in the details. | Description and value of any property | Date payment or transfer was made | |
| | Yes. Fill in the details. Semrad Law Firm | Description and value of any property | Date payment or transfer | |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of any property transferred | Date payment or transfer was made | payment |
| | Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | Description and value of any property transferred | Date payment or transfer was made | payment |

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| Debtor | r 1 Lamon | Felton | Case number (if known) | |
|----------|--|--|---|------------------------------|
| | First Name Middle N | lame Last Name | | |
| h | Within 1 year before you filed for bankrup nelp you deal with your creditors or to m Do not include any payment or transfer that | ake payments to your creditors? | our behalf pay or transfer any property to a | nyone who promised to |
| <u>[</u> | No Yes. Fill in the details. | | | |
| | _ | Description and value of a transferred | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | |
| | Number Street | | | |
| | City State Zip (| Code | | |
| | | | | |
| ti Ir | he ordinary course of your business or fi | nancial affairs? made as security (such as the granting of | ransfer any property to anyone, other than a security interest or mortgage on your property | |
| [| ✓ No Yes. Fill in the details. | | | |
| | | Description and value of a property transferred | Describe any property or payments received or debts pain exchange | Date transfer was made |
| | Person Who Received Transfer | | | |
| | Number Street | | | |
| | City State Zip (Person's relationship to you | Code | | |
| | Person Who Received Transfer | | | |
| | Number Street | | | |
| | City State Zip (Person's relationship to you | Code | | |
| b | Within 10 years before you filed for bankroeneficiary? These are often called asset-protection device | | a self-settled trust or similar device of whic | ch you are a |
| [[| ✓ No Yes. Fill in the details. | | | |
| | _ | Description and value of | the property transferred | Date transfer was made |
| | Name of trust | | | |

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Felton Debtor 1 Lamon Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Felton Debtor 1 Lamon Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt | | Lamon | | | Fe | elton | Cas | se number <i>(ii</i> | fknown) | | |
|------|------|----------------------|----------------|---------------------------------------|----------------|-----------------|--|---|---------------|-----------------|----------------------------------|
| | | First Name | | Middle Name | La | st Name | | | | | |
| 26. | | e you been a part | y in any judic | ial or administr | rative proce | eding under | any environmer | ntal law? In | clude settler | ments and ord | ers. |
| | 넴 | Yes. Fill in the def | tails. | | | | | | | | |
| | | | | | Court or ag | ency | | Nature (| of the case | | Status of the |
| | | Case title | | | | | | | | | case |
| | | | | | Court Name | , | | | | | Pending |
| | | Case number | | | NumberStre | et | | | | | On appeal |
| | | | | | City | State | Zip Code | | | | Concluded |
| Part | 11: | Give Details Al | oout Your E | Business or Co | onnections | s to Any Bu | siness | | | | |
| 27 | With | nin 4 years before | | | | - | | following c | onnections t | o any husines | :? |
| 21. | WILI | - | | | | | - | _ | | o any busines: | > f |
| | | | | mpioyed in a tra pility company (L | - | | r activity, either f ertnershin (LLP) | ruii-time or p | part-time | | |
| | | A partner in a | | | _LO) OF IIITII | od liability po | articisiip (LLi) | | | | |
| | | | - | naging executiv | e of a corp | oration | | | | | |
| | | _ | | of the voting or e | - | | poration | | | | |
| | | No. None of the a | abovo applio | e Co to Part 12 | | | | | | | |
| | 씜 | Yes. Check all the | | | | w for each h | nusiness | | | | |
| | ш | 100. Officer all th | at apply abo | | | | are of the busine | ,ee | Employer I | dentification r | number Do not |
| | | | | | | ind the nate | are or the bushing | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | umber or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | | | | | Dates husi | ness existed | |
| | | Number Street | | | Name | of account | ant or bookkeep | per | Dates Dasi | ness existed | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the natu | ure of the busine | ess | | | number Do not |
| | | | | | _ | | | | EIN: | olai ocounty i | difficient of Trine. |
| | | Business Name | | | | | | | | | |
| | | Number Street | | | Name | of account | ant or bookkeep | ner | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | , or account | unit of Bookkoop | 701 | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the natu | ure of the busine | ess | | | number Do not number or ITIN. |
| | | | | | _ | | | | EIN: | • | |
| | | Business Name | | | | | | | | | |
| | | Number Street | | | None | of account | ant or bookkee | nor. | Dates busi | ness existed | |
| | | City | State | Zip Code | Name | or account | ant or bookkeep | Jer | From | То | |
| | | • | | 1 | | | | | 110111 | 10 | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 | Lamon | | | Felton | Case number (if known) |
|------|------------|--|--------------------------------|---|-------------------------------|---|
| | | First Name | | Middle Name | Last Name | |
| 28. | cred | nin 2 years before ditors, or other pa No Yes. Fill in the de | rties. | bankruptcy, did yo | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | | | | | Date issued | |
| | | - | | | | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Street | | | - | |
| | | Number Street | | | | |
| | | City | State | Zip Code | - | |
| | | 1 | Otato | p | | |
| Part | 12: | Sign Below | | | | |
| 1 | true a | ind correct. I und kruptcy case can | erstand that result in fine | making a false stat s up to \$250,000, o | tement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /S/ | Lamon Feltor | | | |
| | | Signat | ure of Debtor | ı | | Signature of Debtor 2 |
| | | Date | 1/10/2017 | | | Date 1/10/2017 |
| | Did vo | ou attach addition | nal pages to ' | our Statement of | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| ١. | | | , , , | | | 3 • • • • • • • • • • • • • • • • • • • |
| | ✓ N | | | | | |
| | Y | es | | | | |
| ı | Did yo | ou pay or agree to | pay someon | e who is not an att | orney to help you fill out b | ankruptcy forms? |
| ı | √ N | lo | | | | |
| i | ╡╵ | es. Name of perso | n | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | | | | | | Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | |
|---|------------|-------------|------------------------------|---|
| Debtor 1 | Lamon | | Felton | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | _ |
| Case number (If known) | | | (- , | _ |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: OVERLND BOND Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2013 Dodge Avenger Retain the property and [explain]: Creditor's Surrender the property. No. name: AAFCU Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. 004 InstallmentLoan securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debtor | Lamon | | Felton | Case number (if | |
|----------|------------------------------|-----------------------------|------------------------|-------------------------------|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired Po | ersonal Property Lease | es | | |
| | | | | v Contracts and Unovnired | Leases (Official Form 106G), fill in the |
| informat | tion below. Do not list rea | | leases are leases that | are still in effect; the leas | e period has not yet ended. You may |
| Des | cribe your unexpired pers | onal property leases | | V | Vill the lease be assumed? |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | [| No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Less | sor's name: | | | | No Yes |
| | cription of leased perty: | | | | |
| Rout 2 | Sign Below | | | | |
| | | are that I have indicated r | ny intention about any | property of my estate that | t secures a debt and any personal |
| | erty that is subject to an u | | | | •• |
| x | s/ Lamon Felton | | × | | |
| _ | gnature of Debtor 1 | | _ | gnature of Debtor 1 | |
| | | | | | |
| Da | ate 1/10/2017 MM/DD/YYYY | | Da | ate 1/10/2017 MM/DD/YYYY | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1 717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of ROBERT J. SEMRAD & ASSOCIATES, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that Robert J. Semrad & Associates is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that Robert J. Semrad & Associates may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I agree to pay Robert J. Semrad & Associates \$ 1,465.00 in attorney fees plus costs in the amount of \$335.00 to represent my interests in the preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; filing of any necessary amendments; case administration and monitoring; as well as post discharge review of my credit report to ensure reporting. I further understand and agree that additional professional legal services will result in additional fees that are due ROBERT J. SEMRAD & ASSOCIATES, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$50.00
Motion to Reopen and Avoid Lien \$1000.00
Motion to Reopen \$350.00 + 50

Motion to Reopen \$350.00 + court costs

Preparation and execution of reaffirmation agreements \$300 per collateral

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to Robert J. Semrad & Associates LLC. Any fees owing to Robert J. Semrad & Associates and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by Robert J. Semrad & Associates LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by Robert J. Semrad & Associates after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, Robert J. Semrad & Associates LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for Robert J. Semrad & Associates to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of \$1,465.00 to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of Robert J. Semrad &

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Associates, LLC in exchange for a commitment by Robert J. Semrad & Associates, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by Robert J. Semrad & Associates, LLC and will be used for general expenses of the firm.

As ROBERT J. SEMRAD & ASSOCIATES, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with ROBERT J. SEMRAD & ASSOCIATES, LLC. This includes, but is not limited to, providing ROBERT J. SEMRAD & ASSOCIATES, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that ROBERT J. SEMRAD & ASSOCIATES, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by ROBERT J. SEMRAD & ASSOCIATES, LLC or an agent thereof.

Client Le Client Client ______ Client _____

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| ln ro | | Northern Distr | | |
|-------------|--|---|---|---|
| In re —— | Lamon Felton ; | | Case No. | (If known) |
| | Debtor | | Chapter | Chapter 7 |
| CO | ursuant to 11 U.S.C. § 329(a) and Fompensation paid to me within one | Fed. Bankr. P. 2016(b), I cert e year before the filing of the | DN OF ATTORNEY For the abore petition in bankruptcy, or agreed to | ovenamed debtor(s) and that to be paid to me, for services |
| | endered or to be rendered on behalf or legal services, I have agreed to a | . , | plation of or in connection with the | bankruptcy case is as follows: \$1,465.00 |
| Pr | rior to the filing of this statement I | have received | | \$0.00 |
| Ва | alance Due | | | \$1,465.00 |
| 2. Tr | he source of the compensation paid | d to me was: | | |
| | Debtor | Other (specify | <i>'</i>) | |
| 3. Th | he source of the compensation paid | d to me is: | | |
| | ✓ Debtor | Other (specify | <i>'</i>) | |
| 4. | I have not agreed to share the ab members and associates of my I | oove-disclosed compensational law firm. | on with any other person unless the | y are |
| | | w firm. A copy of the agreem | vith a other person or persons who a nent, together with a list of the name | |
| 5. ln | | | al service for all aspects of the bank g advice to the debtor in determining | |
| | b. Preparation and filing of any | petition, schedules, statemo | ents of affairs and plan which may b | pe required; |
| | c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and any a | adjourned hearings thereof; |
| 6. By | y agreement with the debtor(s), the | above-disclosed fee does r | not include the following services: | |
| | | | | |
| | | CERTIFIC | CATION | |
| | ertify that the foregoing is a comple (s) in this bankruptcy proceedings. | te statement of any agreeme | ent or arrangement for payment to m | ne for representation of the |
| | 1/10/2017 | | /s/ Megan Holmes | |
| | Date | - | Signature of Attorney | _ |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Felton, Lamon ; | Case No | |
|-----------------|-----------------|---|------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | VERIFICA | TION OF CREDITOR MATRIX | |
| Th knowledge | | at the attached list of creditors is true and | correct to the best of their |
| Date: | 1/10/2017 | /s/ Felton, Lamon | |
| | | Felton, Lamon <i>Signature of Debtor</i> | |
| | | /s/ | |
| | | Signature of Joint Debtor | |

OVERLND BOND 4701 W FULLERTON CHICAGO , 60639

CNAC SH INC/JDB 300 W. 162nd St. South Holland , 60473

TRNTY/ST LNS 2065 Half Day Rd, Deerfield Deerfield , 60015

ROGERS & HOL PO BOX 879 MATTESON , 60443

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , 60622

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , 98057

CREDIT MANAGEMENT LP PO Box 118288 Carrollton , 75011

AAFCU 10600 W Higgins Rd Ste 100 Rosemont , 60018

Bell Subrogation Services 1411 N Westshore Blvd, Suite 100 Tampa, 33607

Speedy Cash Po Box 782648 Wichita , 67278

Majestic Lake Financial Inc 635 East Highway 20 # K Upper Lake, 95485 City of Chicago Parking 121 N. LaSalle St # 107A Chicago , 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago , 60654

Illinois Tollway PO Box 5544 Chicago , 60680

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| Debtor 1 Lamon First Name | | Felton | Case number (if known) | |
|--|--|--|--|--|
| | Middle Name uestions for Reporting Purposes | Last Name | | |
| 16. What kind of debts do you have? | 40 | r consumer debts? Co. I primarily for a persona r business debts? Busin nvestment or through to | al, family, or household ness debts are debts that he operation of the bus | purpose." at you incurred to obtain iness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under Chapter Yes. I am filing under Chapter expenses are paid that fu No. Yes. | 7. Do you estimate that a | fter any exempt property istribute to unsecured cre | is excluded and administrative ditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,00 | turni turni | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | -\$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | I have examined this petition, and correct. If I have chosen to file under Chapter 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtained I request relief in accordance with I understand making a false state connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 15 | apter 7, I am aware that understand the relief avanderstand the relief avanders and read the notice rather than the chapter of title 11 ament, concealing propese can result in fines up | I may proceed, if eligible vailable under each char o pay someone who is required by 11 U.S.C. § , United States Code, serty, or obtaining mone of to \$250,000, or impris | e, under Chapter 7, 11,12, or 13 pter, and I choose to proceed not an attorney to help me fill 342(b). pecified in this petition. y or property by fraud in sonment for up to 20 years, or |
| SERGERA SORP F H. CENT STOCK. CONSISSAI SORPHI-POROSPER VI. NI-SPEIL BEF. SERGERA SORPHI SERGERA | MM / DD / | YYYY | Executed on | MM / DD / YYYY |

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| Fill in this infor | rmation to identify your c | ase: | | |
|---------------------------------|---|---|---|---|
| Debtor 1 | Lamon | | Felton | |
| | First Name | Middle Name | Last Name | - |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | | _ |
| | | | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | _ |
| Case number | | P. C. | (State) | _ |
| <u> </u> | F 4005 | | | Check if this is |
| Official | Form 106De | <u>.</u> | | amended filing |
| Declarat | ion About an | _ Individual Deb | tor's Schedules | 12/- |
| If two married | people are filing togethe | er, both are equally resp | onsible for supplying correct is | nformation. |
| Part 1: Sign | Below | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out bankru | ptcy forms? |
| ☑ No | | | | |
| Yes. N | Name of person | | Attach Bankruptcy Petil Signature (Official Form | tion Preparer's Notice, Declaration, and n 119). |
| | | • | • | |
| Under pen that they a | alty of perjury, I declare are true and correct. | that I have read the sur | nmary and schedules filed wit | h this declaration and |
| /s/ Lamor | / // | Andread | * | |
| Signature of | TUEDTOR 1 | | Signature of | Debtor 2 |

Date

MM/DD/YYYY

Date 1/10/2017

MM/DD/YYYY

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| Debtor 1 | Lamon First Name | Middle Name | Felton | Case number (if known) |
|------------|---|--------------------------------------|-----------------------------|--|
| | FIRST IVAIIE | MIDDIE INATE | Last Name | |
| 28. Wit | thin 2 years before you editors, or other partie | u filed for bankruptcy, did y es. | ou give a financial state | ment to anyone about your business? Include all financial institutions, |
| V | No | | | |
| L | Yes. Fill in the details | s below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12: | Sign Below | | | |
| a bar | nkruptcy case can res | ult in fines up to \$250,000, | or imprisonment for up t | perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature | of Debtor 1 | | Signature of Debtor 2 |
| | Date 1/10 | i/2017 | | Date 1/10/2017 |
| Did y | ou attach additional p | pages to Your Statement of | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| I | No | | | · |
| | 'es | | | |
| Did y | ou pay or agree to pay | y someone who is not an at | torney to help you fill out | t bankruptcy forms? |
| ☑ ▷ | No | | | |
| | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| otor Lamon | | Felton | Case number (if |
|---------------------------------|--|--|---|
| First Name | Middle Name | Last Name | known) |
| 2: List Your Unexpired | d Personal Property Leases | | |
| mation below. Do not list i | operty lease that you listed in S real estate leases. Unexpired le property lease if the trustee do | ases are leases that a | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). |
| Describe your unexpired p | ersonal property leases | | Will the lease be assumed? |
| Lessor's name: | | | □ No □ Yes |
| Description of leased property: | artermenter d'est glighte companyament en gran communique propriété de la balance passe de la communique de la | от (1974—4 добого — боложения на почения почения услужую — боложения (1974—4 добого — боложения почения по | |
| Lessor's name: | | Paller of Palmer & Arminimistra & Administra (Application of Application) | No No Yes |
| Description of leased property: | · · · · · · · · · · · · · · · · · · · | and the second s | |
| essor's name: | | | □ No □ Yes |
| escription of leased roperty: | | | L |
| essor's name: | | | □ No □ Yes |
| escription of leased roperty: | | | |
| essor's name: | | | □ No □ Yes |
| escription of leased roperty: | | | |
| essor's name: | | | □ No □ Yes |
| escription of leased operty: | | | |
| essor's name: | | | □ No □ Yes |
| escription of leased operty: | | . with a | en e |
| Sign Below | Barres action of the transfer graph productions, it is | | taran managan ang ang Palisa ang ang ang ang ang ang ang ang ang an |
| | clare that I have indicated my i | ntention about any pr | operty of my estate that secures a debt and any personal |
| /s/ Lamon Felton | - cake | × | |
| Signature of Debtor 1 | 4. | Signa | ture of Debtor 1 |
| Date 1/10/2017 | | Date | 1/10/2017 |
| MM/DD/YYYY | | | MM/DD/YYYY |

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| Debtor 1 Lamon First Name | Middle Name | Felton Last Name | Case number (if i | (nown) | |
|---|--|---|-----------------------------|---------------------------------------|---------------------|
| | | Last Name | Column A Debtor 1 | Column B Debtor 2 or non-filing spous | 9 |
| Unemployment compensation Do not enter the amount if you counder the Social Security Act. Ins | contend that the amount re | ceived was a benefit | \$ <u>0.00</u> | \$0.00 | _ |
| For you For your spouse | | \$0.00 \$0.00 | | | |
| Pension or retirement income, benefit under the Social Security | . Do not include any amou | nt received that was a | \$0.00 | \$0.00 | _ |
| 10.Income from all other source amount. Do not include any ben payments received as a victim of international or domestic terrorish page and put the total below. | s not listed above. Specify efits received under the Social war crime, a crime against | cial Security Act or | | | |
| Total amounts from separate pag | res, if any. | | +\$0.00 | +\$0.00 | - - - |
| 11. Calculate your total current each | monthly income. Add line | s 2 through 10 for | \$3,324.84 | + \$ <u>0.00</u> | = \$3,324.84 |
| column. Then add the total for | Column A to the total for (| Column B. | <u> </u> | | Total current |
| Part 2: Determine Whether th | ne Means Test Applies | s to You | | | monthly income |
| 12. Calculate your current monthl | | | | | |
| 12a. Copy your total current mon | | now these steps. | Сор | y line 11 here -> | \$3,324.84 |
| Multiply by 12 (the number | of months in a year). | | | | X 12 |
| 12b. The result is your annual inc | ome for this part of the for | m. | | 12 | |
| 13 Calculate the median family in | come that applies to you | Follow these steps: | | | |
| Fill in the state in which you live. | y minimum | Illinois | | | |
| Fill in the number of people in you | ır household. | 2 | | | |
| Fill in the median family income for household. | or your state and size of | | | . 1 | 3. \$65,659.00 |
| To find a list of applicable median instructions for this form. This list 14. How do the lines compare? | income amounts, go onlin may also be available at the | e using the link specified e bankruptcy clerk's offici | in the separate e. | | |
| 14a. Line 12b is less than or Go to Part 3. | equal to line 13. On the top | o of page 1, check box 1 | , There is no presumption o | f abuse. | |
| 14b. Line 12b is more than lin Go to Part 3 and fill out | ne 13. On the top of page Form 122A-2. | 1, check box 2, The pres | umption of abuse is determ | ined by Form 122A-2. | |
| Part 3: Sign Below | | | | | |
| | | | | | |
| By signing here, I declare under p | penalty of perjury that the ir | nformation on this statem | ent and in any attachments | is true and correct. | |
| · / | | | | | |
| /s/ Lamon Felton Signature of Debtor 1 | -Our | — ★ — Siq | gnature of Debtor 2 | | |
| Date 1/10/2017 MM/DD/YYYY | | | ate 1/10/2017 MM/DD/YYYY | | |
| If you checked line 14a, do NO If you checked line 14b, fill out | | | | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in re: Felton, Lamon ; | | Case No | | |
|------------------------|--|---|---|--|
| | Debtor(s) | | | |
| | | Chapter7 Chapter7 | | |
| | VERIFICATION | ON OF CREDITOR MATRIX | | |
| knowled | The above named Debtors hereby verify that t lge. | the attached list of creditors is true and correct to the best of their | | |
| Date: | 1/10/2017 | /s/ Felton, Lamon | | |
| | | Felton, Lamon Signature of Debtor | _ | |
| | | | | |
| | | /s/ | | |
| | | Signature of Joint Debtor | | |